



# 2012 ADULT SOFTBALL REGISTRATION FORM

PLEASE SUBMIT THIS ENTIRE SHEET WITH APPROPRIATE INFORMATION TO:

Troy Recreation Department  
ADULT SOFTBALL  
3179 Livernois, Troy, Michigan, 48083

Please complete appropriate areas of information including the assistant manager who is also eligible to sign roster, add/delete players and act on the team's behalf. Make checks payable to City of Troy.

## Team Registration Form

Please complete/check appropriate areas.

League Fee - \$566.00 (Check, Cash, Visa/MC)

Returning Team ( )

New Team ( )

Returning Teams Only- (2011 Information)

Team Name \_\_\_\_\_

League/night \_\_\_\_\_

### League Offerings for 2012:

Returning teams please check league preference. New teams please list in order of preference for lottery.

( ) Men's C Tuesday

( ) Men's E Thursday

( ) Co-ed C Tuesday

( ) Men's D Wednesday

( ) Co-ed B Monday

( ) Women's Thursday

( ) Men's E Monday

( ) Co-ed C Monday

Team Name \_\_\_\_\_

Manager \_\_\_\_\_

Assist. Manager \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone (1) \_\_\_\_\_ (2) \_\_\_\_\_

Phone (1) \_\_\_\_\_ (2) \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

## **Interested Individual Form (no fee)**

Please complete information below. Information will be distributed to managers to call at their discretion. League will not assign players to teams. Individual teams will determine participation fee. Please designate league preference above. No guarantee of placement in league.

Name \_\_\_\_\_

Male ( ) Female ( )

Address \_\_\_\_\_

Status: Resident ( )

Employee within City limits ( )

City \_\_\_\_\_ Zip \_\_\_\_\_

Non Resident ( )

Phone (1) \_\_\_\_\_

League preference \_\_\_\_\_

Phone (2) \_\_\_\_\_